

**REQUEST FOR LEGISLATIVE ACTION  
EXECUTIVE OFFICE**

Completed by County Counselor's Office:  
Res/Ord No.: 5235  
Sponsor(s): Theresa Galvin  
Date: June 10, 2019

JUN - 6 2019

<p><b>SUBJECT</b></p>	<p>Action Requested  <input type="checkbox"/> Resolution  <input checked="" type="checkbox"/> Ordinance</p> <p>Project/Title: <u>Appropriating \$402,719.52 from the undesignated fund balance in acceptance of insurance proceeds from Travelers as it relates to burst pipes at the Downtown Courthouse</u></p>												
<p><b>BUDGET INFORMATION</b> <i>To be completed By Requesting Department and Finance</i></p>	<table border="1" data-bbox="324 541 1209 1008"> <tr> <td>Amount authorized by this legislation this fiscal year:</td> <td>\$402,719.52</td> </tr> <tr> <td>Amount previously authorized this fiscal year:</td> <td>\$</td> </tr> <tr> <td>Total amount authorized after this legislative action:</td> <td>\$402,719.52</td> </tr> <tr> <td>Amount budgeted for this item * (including transfers):</td> <td>\$</td> </tr> <tr> <td>Source of funding (name of fund) and account code number; FROM 001 (General Fund)-1240 (Courthouse Flood Insurance) -47040 (Reimbursement for Damage Claims)</td> <td>FROM ACCT \$402,719.52</td> </tr> <tr> <td>TO 001 (General Fund) - 1240 (Courthouse Flood Insurance) - 56790 (Other Contractual)</td> <td>TO ACCT \$402,719.52</td> </tr> </table> <p>* If account includes additional funds for other expenses, total budgeted in the account is: \$</p> <p><b>OTHER FINANCIAL INFORMATION:</b></p> <p><input type="checkbox"/> No budget impact (no fiscal note required)  <input type="checkbox"/> Term and Supply Contract (funds approved in the annual budget); estimated value and use of contract:  Department: Estimated Use: \$</p> <p>Prior Year Budget (if applicable):  Prior Year Actual Amount Spent (if applicable):</p>	Amount authorized by this legislation this fiscal year:	\$402,719.52	Amount previously authorized this fiscal year:	\$	Total amount authorized after this legislative action:	\$402,719.52	Amount budgeted for this item * (including transfers):	\$	Source of funding (name of fund) and account code number; FROM 001 (General Fund)-1240 (Courthouse Flood Insurance) -47040 (Reimbursement for Damage Claims)	FROM ACCT \$402,719.52	TO 001 (General Fund) - 1240 (Courthouse Flood Insurance) - 56790 (Other Contractual)	TO ACCT \$402,719.52
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<p><b>PRIOR LEGISLATION</b></p>	<p>Prior ordinances and (date): 5205 (3/11/19); 5211 (3/25/19); 5228 (5/20/19);</p> <p>Prior resolutions and (date):</p>												
<p><b>CONTACT INFORMATION</b></p>	<p>RLA drafted by (name, title, &amp; phone): Sarah Matthes, Grant Audit &amp; Risk Manager, 881.3202</p>												
<p><b>REQUEST SUMMARY</b></p>	<p>Travelers Insurance sent two payments, check #90289205 for \$369,478.87 and check #90291386 for \$33,240.65, totaling \$402,719.52 to go towards repairs and other expenses related to the water line breaks at the Downtown Courthouse. Requesting that the \$402,719.52 be appropriated into 001-1240-56790 to cover repairs.</p>												
<p><b>CLEARANCE</b></p>	<p><input type="checkbox"/> Tax Clearance Completed (Purchasing &amp; Department)  <input type="checkbox"/> Business License Verified (Purchasing &amp; Department)  <input type="checkbox"/> Chapter 6 Compliance - Affirmative Action/Prevailing Wage (County Auditor's Office)</p>												

ATTACHMENTS	Copy of Travelers Insurance checks	
REVIEW	Department Director:	Date: 6-6-2019
	Finance (Budget Approval): <i>If applicable</i>	Date: 6/6/19
	Division Manager:	Date: 6-6-19
	County Counselor's Office:	Date: 6/6/19

Fiscal Information (to be verified by Budget Office in Finance Department)

- This expenditure was included in the annual budget.
- Funds for this were encumbered from the \_\_\_\_\_ Fund in \_\_\_\_\_.
- There is a balance otherwise unencumbered to the credit of the appropriation to which the expenditure is chargeable and there is a cash balance otherwise unencumbered in the treasury to the credit of the fund from which payment is to be made each sufficient to provide for the obligation herein authorized.
- Funds sufficient for this expenditure will be/were appropriated by Ordinance # \_\_\_\_\_
- Funds sufficient for this appropriation are available from the source indicated below.

Account Number:	Account Title:	Amount Not to Exceed:
001-1240-47040	General Fund – Courthouse Flood Insurance – Reimbursement for Damage Claims	\$402,719.52

- This award is made on a need basis and does not obligate Jackson County to pay any specific amount. The availability of funds for specific purchases will, of necessity, be determined as each using agency places its order.
- This legislative action does not impact the County financially and does not require Finance/Budget approval.



THE TRAVELERS - TRAVELERS - PROPERTY  
TRAVELERS - PROPERTY CLAIM  
P.O. BOX 430  
BUFFALO NY 14240-0430

SA03111

891A 90289205

**TRAVELERS** 

DATE: 05/28/19  
LOSS DATE: 01/31/19  
FILE NUMBER: 877 FR FDH7165 J

JACKSON COUNTY, MO  
415 EAST 12TH ST. ROOM105  
KANSAS CITY MO 64106

AGENT:  
LOCKTON COMPANIES LLC

ACCOUNT NAME:  
JACKSON COUNTY, MO

THE TRAVELERS INDEMNITY COMPANY

**EXPLANATION OF PAYMENT**

Building \$369478.87  
TOTAL PAID \$369478.87

*001-1240-47040  
Travelers Pw DTCH 1/31/19 #5*

SUPPLEMENT BUILDING LOSS  
ATTN: SARAH MATTHES

FOR ADDITIONAL INFORMATION, CONTACT: DAVID B MCLEAN AT (913)967-9095

8003128  
\_ DETACH CHECK

UNSUMM -1  
OVRPUN2-1:  
DETACH CHECK

THIS DOCUMENT HAS A RED BACKGROUND - BORDER CONTAINS MICRO-PRINTING AND AN ARTIFICIAL WATERMARK - HOLD AT AN ANGLE TO VIEW

Citibank, N.A.  
One Penns Way  
New Castle DE 19720

**TRAVELERS**   
P.O. BOX 430  
BUFFALO NY 14240-0430  
(913)967-9095

891A 90289205 62  
3

DATE: 05/28/19  
ACCOUNT NUMBER: J99  
FILE NUMBER: 877 FR FDH7165 J

VOID IF NOT PRESENTED WITH:  
ONE YEAR AFTER DATE OF ISS:

THREE HUNDRED SIXTY NINE THOUSAND FOUR HUNDRED SEVENTY EIGHT AND 87/100 --- **PAY: \$\*\*369,478.87** DI

PAY TO THE ORDER OF  
JACKSON COUNTY, MO  
415 EAST 12TH ST. ROOM105  
KANSAS CITY MO 64106

06239  
A03111

*Douglas K. Russell*  
AUTHORIZED SIGNATURE



THE TRAVELERS - TRAVELERS - PROPERTY  
TRAVELERS - PROPERTY CLAIM  
P.O. BOX 430  
BUFFALO NY 14240-0430

SA03813

891A 90291386

**TRAVELERS** 

DATE: 05/29/19  
LOSS DATE: 02/03/19  
FILE NUMBER: 877 FR FDH8522 P

JACKSON COUNTY, MO  
415 E 12TH ST  
KANSAS CITY MO 64106-2706

AGENT:  
LOCKTON COMPANIES LLC

ACCOUNT NAME:  
JACKSON COUNTY, MO

THE TRAVELERS INDEMNITY COMPANY

**EXPLANATION OF PAYMENT**

Building \$33240.65  
TOTAL PAID \$33240.65

001-1240-47040  
Travelers PW DTCH 2/3/19 #2

SUPPLEMENT COUNTY COURTHOUSE  
ATTN: SARAH MATTHES

FOR ADDITIONAL INFORMATION, CONTACT: DAVID B MCLEAN AT (913)967-9095

9003831  
\_ DETACH CHECK

UNSUMM -11  
OVRPUN2-12  
DETACH CHECK

THIS DOCUMENT HAS A RED BACKGROUND - BORDER CONTAINS MICRO PRINTING AND AN ARTIFICIAL WATERMARK - HOLD AT AN ANGLE TO VIEW

ChBank, N.A.  
One Penns Way  
New Castle DE 19720

**TRAVELERS** 

891A 90291386

62-31

P.O. BOX 430  
BUFFALO NY 14240-0430  
(913)967-9095

DATE: 05/29/19  
ACCOUNT NUMBER: J99  
FILE NUMBER: 877 FR FDH8522 P

VOID IF NOT PRESENTED WITHIN  
ONE YEAR AFTER DATE OF ISSU

THIRTY THREE THOUSAND TWO HUNDRED FORTY AND 65/100

PAY: \$\*\*\*33,240.65 DBI

PAY TO THE ORDER OF JACKSON COUNTY, MO  
415 E 12TH ST  
KANSAS CITY MO 64106-2706

17644  
A03813

*Douglas K. Russell*  
AUTHORIZED SIGNATURE